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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Paul Martin Kenny, et al.

Attorney Docket No.: HGF1P008

Application No.: 09/194,875

Examiner: Hung V. Ngo

Filed: April 8, 2002

Group: 2831

Title: ELECTRONIC DEVICE WITH A
SHIELDING ENCLOSURE

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first-class mail on July 20, 2004 in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

Signed: _____

Valerie Olsen
Valerie Olsen

SUPPLEMENTAL AMENDMENT

Mail Stop NON-FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

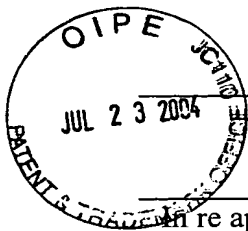
Sir:

Dear Sir:

This Amendment is a supplement to the Amendment filed on June 21, 2004. Please enter the following amendments and consider the following remarks:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begins on page 9 of this paper.



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AMENDMENT TRANSMITTAL

Mail Stop NON-FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Supplemental Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	13	MINUS	20	0	x 9 = 0	x 18 = 0
Independent Claims	2	MINUS	3	0	x 43 = 0	x 86 = 0
Multiple Dependent Claim Present and Fee Not Previously Paid					\$145.00	\$290.00
Total					\$0	\$0

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant is entitled to Small Entity Status under 37 C.F.R. §1.27.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. HGF1P008).

Dated: 7/20/04

Respectfully submitted,
BEYER/WEAVER & THOMAS, LLP

William J. Egan, III
Reg. No. 28,411

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